

# CLAIMS ONLY

Application Number

10 / 776625

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/		/				51					
2		/	/	/			52					
3	/	/		/			53					
4		/		/			54					
5		/		/			55					
6		/		/			56					
7		/		/			57					
8		/		/			58					
9		/		/			59					
10		/		/			60					
11		/		/			61					
12		/		/			62					
13		/		/			63					
14		/		/			64					
15	/		/				65					
16	/	/		/			66					
17	/	/	/	/			67					
18	/	/	/	/			68					
19	/	/	/	/			69					
20	/	/	/	/			70					
21	/	/	/	/			71					
22	/	/	/	/			72					
23	/	/	/	/			73					
24		/	/	/			74					
25		/	/	/			75					
26		/	/	/			76					
27		/	/	/			77					
28		/	/	/			78					
29		/	/	/			79					
30		/	/	/			80					
31		/	/	/			81					
32		/	/	/			82					
33		/	/	/			83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	6		6				Total Indep					
Total Depend	20		27				Total Depend					
Total Claims	26		33				Total Claims					